## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

200300846-1

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			(Column 1)		(Column 2)		ľ			OR 1 1		
			35					RATE	FEE		RATE	FEE
FOR			NUMBER FILED			ER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			35 minus 20=		* 15			X\$ 9=		OR	X\$18=	270
INDEPENDENT CLAIMS			minus 3 =					X42=		OR	X84=	168
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than z	ero, ente	r "0" in c	olumn 2	_	TOTAL		OR	TOTAL	1188
CLAIMS AS AMENDED - PART II											OTHER	THAN
	Section of the second section in the second	(Column 1)		(Colui				SMALL ENTITY			SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	*** DENIDENT	F CLAIM	=		X42=		OR	X84=	
_	THOTFILSE	NIATION OF M	OLITEC DE	FENDEN	CLAIN		۱ [	+140=		OR	+280=	
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		NDDII. FEE	<u> </u>	•	ADDIT. PEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	rade de la companya d	HIGH NUM PREVI PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	]	X42=		00	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	CLAIM		]			OR	7.0	
							L	+140=		OR	+280=	
							Δ	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	]	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	]	X42=			X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		<b>]</b>			OR		
*	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  TOTAL ADDIT. FEE ADDIT. FEE												
		imber Previously P nber Previously Pa							ropriate bo			